PTO/SB/82 (04-06)
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| | Application Number | 10/686,950 | | |
| REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY | Filing Date | 10/16/2003 | | |
| | First Named Inventor | Valilant 1626 | | |
| | Art Unit | | | |
| AND CHANGE OF CORRESPONDENCE ADDRESS | Examiner Name | Not Yet Assigned | | |
| CHANGE OF CORRESPONDENCE ADDRESS | Attorney Docket Number | 346715-0568 | | |

| I hereby rev | oke all pro | vious powers of a | ttornev given i | n the | above-i | dentified | applic | ation. | |
|--|------------------------------|-------------------|-----------------|-------|---------|-----------|--------|--------|------------------|
| A Power of Attorney is submitted herewith. | | | | | | | | | |
| OR | | | | | | _ | | | |
| ✓ I here | | | | | | | 9329 | | |
| ✓ Please change the correspondence address for the above-identified application to: | | | | | | | | | |
| ✓ The address associated with Customer Number: 48329 | | | | | | | | | |
| OR | | | | | | | | | |
| Firm o | r ual Name | | | | | | | | |
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| I am the: | | - | | | | | | | |
| ☐ Appl | licant/Inven | tor. | | | | | | | |
| Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | | | | | | | | |
| SIGNATURE of Applicant or Assignee of Record | | | | | | | | | |
| Signature | \mathcal{A} | Lete | lel | | | | | | |
| Name | ARLE | OE YEE-F | lating Di | | | | 1-9 | 1cM | ester University |
| Date | どうり | | | | lephon | (40 | | | 7140 ext, 240 |
| NOTE: Signatures of all the inventors or assignases of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | | | | | |
| Total | Total offorms are submitted. | | | | | | | | |

This collection of information is required by 37 CPR 138. The information is required to you close the first property of the p